Case 08-25580 Doc 1 Filed 09/26/08 Entered 09/26/08 07:13:40 Desc Main

| DI (OHICIAI FULIII I) (1/00)   | Document   | Page 1 of 4  | 2  |   |  |  |  |
|--|--|--|--|---|--|--|--|
|  | tates Bankruptcy C<br>ern District of Illino   | ourt   |  | Volu  | ntary Petition   |  |  |
| Name of Debtor (if individual, enter Last, First, Middle):  Schnayer, Wayne A Jr  Name of Joint Debtor (Spouse) (Last, First, Middle):   |  |  |  |   |  |  |  |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):   |  |  | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): |   |  |  |  |
| Last four digits of Soc. Sec. or Individual-Taxpayer<br>EIN (if more than one, state all): <b>2126</b>   | I.D. (ITIN) No./Complete   | Last four digits of S<br>EIN (if more than o   | Soc. Sec. or Individual-Tone, state all):  | axpayer I.D.  | (ITIN) No./Complete  |  |  |
| Street Address of Debtor (No. & Street, City, State 8956 W 92nd St   | & Zip Code):   | Street Address of Jo   | Street Address of Joint Debtor (No. & Street, City, State & Zip Code):                                   |   |  |  |  |
| Hickory Hills, IL  | ZIPCODE <b>60457-1640</b>  | †  |  | ZIPCODE   |  |  |  |
| County of Residence or of the Principal Place of B <b>Cook</b>   |  | County of Residence  | ce or of the Principal Pla   |   |  |  |  |
| Mailing Address of Debtor (if different from street  | address)   | Mailing Address of   | Joint Debtor (if differen  | nt from street  | address):  |  |  |
|  | ZIPCODE  |  |  | Z   | IPCODE   |  |  |
| Location of Principal Assets of Business Debtor (if  | different from street address at   | pove):   |  |   |  |  |  |
|  |  |  |  | Z   | IPCODE   |  |  |
| Type of Debtor (Form of Organization) (Check one box.)   | Nature of F<br>(Check on   |  | the Petitio  | n is Filed (C   | Code Under Which<br>Check one box.)  |  |  |
|  | Single Asset Real Esta U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker   | Railroad Stockbroker Commodity Broker  |  |   | Chapter 7 Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 12 Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding |  |  |
| check this box and state type of entity below.)  | Other Tax-Exemp  | Clearing Bank Other  Tax-Exempt Entity (Check box, if applicable.)   |  | Nature of D<br>(Check one by<br>y consumer<br>1 U.S.C.<br>red by an |  |  |  |
|  | Debtor is a tax-exempt<br>Title 26 of the United S   | (Check box, if applicable.)  Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).  \$ 101(8) as "incurre individual primarily personal, family, or hold purpose." |  |   |  |  |  |
| Filing Fee (Check one b  | pox)   |  | Chapter 11 I   | Debtors   |  |  |  |
| Filing Fee to be paid in installments (Applicable  | Check one box:  Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).  Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). |  |  |   |  |  |  |
| Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  Check if:  Debtor's aggregate noncontingent liquidated debts owed to non-insiders o affiliates are less than \$2,190,000.                      |  |  |  |   | ved to non-insiders or   |  |  |
| ☐ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  Check all applicable boxes:  ☐ A plan is being filed with this petition ☐ Acceptances of the plan were solicited prepetition from one or more classes creditors, in accordance with 11 U.S.C. § 1126(b).                          |  |  |  |   | m one or more classes of   |  |  |
| Statistical/Administrative Information  Debtor estimates that funds will be available for distribution to unsecured creditors.  Debtor estimates that funds will be available for distribution to unsecured creditors.  Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. |  |  |  |   |  |  |  |
| Estimated Number of Creditors  |  |  |  |   |  |  |  |
| ·  | 5,001-   | 0,001- 25,001-<br>50,000 50,000  | 50,001-<br>100,000   | Over<br>100,000   |  |  |  |
| Estimated Assets   | ,000,001 to \$10,000,001 \$5<br>0 million to \$50 million \$1  | 0,000,001 to \$100,00 to \$500   | 00,001 \$500,000,001<br>0 million to \$1 billion   | More than \$1 billion   |  |  |  |
| Estimated Liabilities  So to \$50,001 to \$100,001 to \$500,001 to \$50,000 \$100,000 \$500,000 \$1 million \$1  | ,000,001 to \$10,000,001 \$5<br>0 million to \$50 million \$1  | 0,000,001 to \$100,00<br>00 million to \$500   | 00,001 \$500,000,001<br>0 million to \$1 billion   | More than \$1 billion   |  |  |  |

| Prior Bankruptcy Case Filed Within Last  | <b>8 Years</b> (If more than two, atta   | sch additional sheet)  |  |
|--|--|--|--|
| Location<br>Where Filed: <b>None</b>   | Case Number:   | Date Filed:  |  |
| Location<br>Where Filed:   | Case Number:   | Date Filed:  |  |
| Pending Bankruptcy Case Filed by any Spouse, Partner or  | Affiliate of this Debtor (If   | more than one, attach additional sheet)  |  |
| Name of Debtor: None   | Case Number: Date Filed:   |  |  |
| District:  | Relationship:  | Judge:   |  |
| Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition. | whose debts an I, the attorney for the petition that I have informed the peti chapter 7, 11, 12, or 13 of explained the relief available | Exhibit B  ted if debtor is an individual e primarily consumer debts.)  ter named in the foregoing petition, declare tioner that [he or she] may proceed under title 11, United States Code, and have under each such chapter. I further certify or the notice required by § 342(b) of the |  |
|  | X /s/ Troy L Gleason   | 9/26/08  |  |
|  | Signature of Attorney for Debtor   | (s) Date   |  |
| Exhi (To be completed by every individual debtor. If a joint petition is filed, e  Exhibit D completed and signed by the debtor is attached and ma  If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached.   | ade a part of this petition.   | •  |  |
|  |  |  |  |
|  |  |  |  |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general  | partner, or partnership pending  | in this District.  |  |
| Debtor is a debtor in a foreign proceeding and has its principal p or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg  | but is a defendant in an action of   | r proceeding [in a federal or state court]   |  |
| Certification by a Debtor Who Resid (Check all app  Landlord has a judgment against the debtor for possession of debtor  | plicable boxes.)   |  |  |
| (Name of landlord or less  | or that obtained judgment)   |  |  |
| (Address of lar  | ndlord or lessor)  |  |  |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

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Name of Debtor(s):

Schnayer, Wayne A Jr

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filing of the petition.

(This page must be completed and filed in every case)

**Voluntary Petition** 

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Document

Document

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(Check only **one** box.)

§ 1515 are attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Name of Debtor(s): Schnayer, Wayne A Jr

#### **Voluntary Petition**

(This page must be completed and filed in every case)

#### **Signatures**

#### Signature(s) of Debtor(s) (Individual/Joint)

Doc 1

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Wayne A Schnayer, Jr

Signature of Debtor

Wayne A Schnayer, Jr

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

September 26, 2008

Date

Χ

# Signature of Attorney\*

X

X /s/ Troy L Gleason Signature of Attorney for Debtor(s) Troy L Gleason 6276510 Printed Name of Attorney for Debtor(s)

Gleason & Gleason

Firm Name

77 W Washington, Ste 1218

Address

Chicago, IL 60602

(312) 578-9530

Telephone Number

**September 26, 2008** 

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual

#### **Signature of Non-Attorney Petition Preparer**

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this

petition is true and correct, that I am the foreign representative of a debtor

☐ I request relief in accordance with chapter 15 of title 11, United

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the

States Code. Certified copies of the documents required by 11 U.S.C.

chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

in a foreign proceeding, and that I am authorized to file this petition.

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

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Official Form 1, Exhibit D (10/06)

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**Northern District of Illinois** 

| IN RE:               | Case No   |
|----------------------|-----------|
| Schnayer, Wayne A Jr | Chapter 7 |
| Debtor(s)            |           |

#### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

| 1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by   |
|---|
| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in    |
| performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the |
| certificate and a copy of any debt repayment plan developed through the agency.   |
|   |

| 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five |
|--|
| days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling        |
| requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent |
| circumstances here.]   |

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied motion for determination by the court.]  | by a  |
|--|-------|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapation of realizing and making rational decisions with respect to financial responsibilities.); | able  |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effor participate in a credit counseling briefing in person, by telephone, or through the Internet.);   | t, to |
| Active military duty in a military combat zone.  |       |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 10 does not apply in this district.  | 9(h)  |

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Wayne A Schnayer, Jr

Date: September 26, 2008

# NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

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using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

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A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by  $\S 342(b)$  of the Bankruptcy Code.

| Printed Name and title, if any, of Bankruptcy Petition Preparer Address:  | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of |
|---|---|
| X   | the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)   |
| Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above. |   |
| Certificate of the Debtor   |   |
| I (We), the debtor(s), affirm that I (we) have received and read this notice.   |   |

| Schnayer, Wayne A Jr         | X /s/ Wayne A Schnayer, Jr         | 9/26/2008 |
|------------------------------|------------------------------------|-----------|
| Printed Name(s) of Debtor(s) | Signature of Debtor                | Date      |
| Case No. (if known)          | X                                  |           |
|                              | Signature of Joint Debtor (if any) | Date      |

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| IN RE:               | Case No   |
|----------------------|-----------|
| Schnayer, Wayne A Jr | Chapter 7 |
| Debtor(s)            | * -       |

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NUMBER OF<br>SHEETS | ASSETS      | LIABILITIES  | OTHER       |
|--|----------------------|---------------------|-------------|--------------|-------------|
| A - Real Property  | Yes                  | 1                   | \$ 0.00     |              |             |
| B - Personal Property  | Yes                  | 3                   | \$ 5,000.00 |              |             |
| C - Property Claimed as Exempt   | Yes                  | 1                   |             |              |             |
| D - Creditors Holding Secured Claims   | Yes                  | 1                   |             | \$ 1,627.00  |             |
| E - Creditors Holding Unsecured Priority<br>Claims (Total of Claims on Schedule E) | Yes                  | 2                   |             | \$ 0.00      |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 5                   |             | \$ 11,842.29 |             |
| G - Executory Contracts and Unexpired<br>Leases                                    | Yes                  | 1                   |             |              |             |
| H - Codebtors  | Yes                  | 1                   |             |              |             |
| I - Current Income of Individual Debtor(s)   | Yes                  | 1                   |             |              | \$ 2,363.70 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                   |             |              | \$ 2,360.00 |
|  | TOTAL                | 17                  | \$ 5,000.00 | \$ 13,469.29 |             |

Form 6 - Statistical Summary (12/17) Doc 1 Filed 09/26/08

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| IN RE:               |           | Case No.  |
|----------------------|-----------|-----------|
| Schnayer, Wayne A Jr |           | Chapter 7 |
|                      | Debtor(s) | •         |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount     |
|---|------------|
| Domestic Support Obligations (from Schedule E)  | \$<br>0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$<br>0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$<br>0.00 |
| Student Loan Obligations (from Schedule F)  | \$<br>0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$<br>0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$<br>0.00 |
| TOTAL   | \$<br>0.00 |

#### State the following:

| Average Income (from Schedule I, Line 16)   | \$<br>2,363.70 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18)   | \$<br>2,360.00 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C |                |
| Line 20)  | \$<br>3,499.99 |

#### **State the following:**

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$<br>0.00      |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |                 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$<br>0.00      |
| 4. Total from Schedule F   |         | \$<br>11,842.29 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$<br>11,842.29 |

| B6A (Official FCASE) Q8,725580 |  |
|--------------------------------|--|
|--------------------------------|--|

IN RE Schnayer, Wayne A Jr

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(If known)

Debtor(s)

Doc 1

Case No.

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION | AMOUNT OF SECURED<br>CLAIM |
|--------------------------------------|--|---------------------------------------|--|----------------------------|
| None                                 |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
|                                      |  |                                       |  |                            |
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Debtor(s)

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(If known)

IN RE Schnayer, Wayne A Jr

\_\_\_\_\_ Case No. \_

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY  | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|---|------------------|---|---------------------------------------|--|
| 1.  | Cash on hand.   | Х                |   |                                       |  |
| 2.  | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      |                  | Checking Account  |                                       | 100.00   |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |   |                                       |  |
| 4.  | Household goods and furnishings, include audio, video, and computer equipment.  |                  | Normal and necessary household goods, including but not limited to : TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece |                                       | 900.00   |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | X                |   |                                       |  |
| 6.  | Wearing apparel.  |                  | Clothing  |                                       | 250.00   |
| 7.  | Furs and jewelry.   | Х                |   |                                       |  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | Х                |   |                                       |  |
| 9.  | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  |                  | Term life - through work - No cash surrender value  |                                       | 0.00   |
| 10. | Annuities. Itemize and name each issue.   | Х                |   |                                       |  |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |   |                                       |  |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |   |                                       |  |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | Х                |   |                                       |  |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |   |                                       |  |
|     |   |                  |   |                                       |  |

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IN RE Schnayer, Wayne A Jr

\_\_\_ Case No. \_\_ Debtor(s)

(If known)

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |   | 1                |                                      |                                       |  |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
|     | TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments.   | Х                |                                      |                                       |  |
| 16. | Accounts receivable.  | X                |                                      |                                       |  |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.  | Х                |                                      |                                       |  |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | Х                |                                      |                                       |  |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.   | X                |                                      |                                       |  |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |                                       |  |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | Х                |                                      |                                       |  |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | Х                |                                      |                                       |  |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |                                       |  |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |                                       |  |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  |                  | 02 Dodge Caravan                     |                                       | 3,750.00   |
| 26. | Boats, motors, and accessories.   | X                |                                      |                                       |  |
|     | Aircraft and accessories.   | X                |                                      |                                       |  |
|     | Office equipment, furnishings, and supplies.  | X                |                                      |                                       |  |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                      |                                       |  |
|     | Inventory.  | X                |                                      |                                       |  |
| 31. | Animals.  | X                |                                      |                                       |  |
| 32. | Crops - growing or harvested. Give particulars.   | Х                |                                      |                                       |  |
|     |   |                  |                                      |                                       |  |
|     |   |                  |                                      |                                       |  |

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IN RE Schnayer, Wayne A Jr

Debtor(s)

\_ Case No. \_ (If known)

#### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| <ul> <li>33. Farming equipment and implements.</li> <li>34. Farm supplies, chemicals, and feed.</li> <li>35. Other personal property of any kind not already listed. Itemize.</li> </ul> | x<br>x<br>x      |                                      |                                       |  |
|  |                  |                                      |                                       |  |
|  |                  | ТО                                   | FAL.                                  | 5,000.00   |

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\_ Case No. \_

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor elects the exemptions to which debtor is entitled under: | Check if debtor claims a homestead exemption that exceeds \$136,875. |
|---|--|
| (Check one box)   |  |

Debtor(s)

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY  | SPECIFY LAW PROVIDING EACH EXEMPTION             | VALUE OF CLAIMED<br>EXEMPTION | CURRENT VALUE<br>OF PROPERTY<br>WITHOUT DEDUCTING<br>EXEMPTIONS |
|--|--|-------------------------------|---|
| SCHEDULE B - PERSONAL PROPERTY   |  |                               | 400.0   |
| Checking Account  Normal and necessary household goods, ncluding but not limited to: TVs, chairs, ables, sofas, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece | 735 ILCS 5 §12-1001(b)<br>735 ILCS 5 §12-1001(b) | 100.00<br>900.00              | 100.0<br>900.0  |
| 02 Dodge Caravan   | 735 ILCS 5 §12-1001(c)                           | 2,400.00                      | 3,750.0   |
|  |  |                               |   |
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Case No.

Debtor(s)

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#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND DESCRIPTION AND VALUE OF<br>PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF ANY                  |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|---|
| ACCOUNT NO. 511023750  |          |                                       | Installment account opened 5/05  | Γ          |              |          | 1,627.00  |   |
| Us Bank<br>PO Box 5229<br>Cincinnati, OH 45201-5229  |          |                                       |  |            |              |          |   |   |
|  |          |                                       | VALUE \$ 3,750.00  | ╀          | ╀            |          |   |   |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |   |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |   |
| ACCOUNT NO.  |          |                                       | VALUE \$   |            |              |          |   |   |
| ocntinuation sheets attached   |          |                                       | (Total of th   | is p       | _            | e)       | \$ 1,627.00   | \$  |
|  |          |                                       | (Use only on la  |            | Tot<br>page  |          | \$ 1,627.00 (Report also on Summary of                            | \$ (If applicable, report also on Statistical |

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(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.) Doc 1 Filed 09/26/08 Document

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Debtor(s)

(If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **✓** Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). **Extensions of credit in an involuntary case** Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol,

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Claims for Death or Personal Injury While Debtor Was Intoxicated

a drug, or another substance. 11 U.S.C. § 507(a)(10).

1 continuation sheets attached

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(If known)

IN RE Schnayer, Wayne A Jr

Debtor(s)

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#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

## **Domestic Support Obligations**

(Type of Priority for Claims Listed on This Sheet) HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED AMOUNT NOT ENTITLED AMOUNT DISPUTED AMOUNT CREDITOR'S NAME, MAILING ADDRESS DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM ENTITLED INCLUDING ZIP CODE AND ACCOUNT NUMBER. OF CLAIM TO (See Instructions above.) PRIORITY PRIORITY, IF ANY current child support ACCOUNT NO. **Bevann Hamill** 706 W Main St Plainfield, IL 60544-1565 0.00 ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO. ACCOUNT NO.  $\mathbf{1}$  of 1 continuation sheets attached to Subtotal Schedule of Creditors Holding Unsecured Priority Claims (Totals of this page) (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.) (Use only on last page of the completed Schedule E. If applicable,

report also on the Statistical Summary of Certain Liabilities and Related Data.)

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(If known)

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Case No.

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT DISPUTED CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS (See Instructions Above.) SUBJECT TO SETOFF, SO STATE CLAIM ACCOUNT NO. 08 Harris Na 900.00 Assignee or other notification for: ACCOUNT NO.

08 Harris Na **Baron Coll** 155 Revere Dr Northbrook, IL 60062-1558 Collections ACCOUNT NO. 4411331107 **Asset Acceptance** PO Box 2036 Warren, MI 48090-2036 644.29 Assignee or other notification for: ACCOUNT NO. **Asset Acceptance FNANB** 

4 continuation sheets attached

Subtotal (Total of this page)

1,544.29

Total

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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\_ Case No. \_

IN RE Schnayer, Wayne A Jr

Debtor(s)

(If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (,                                    | Continuation Sheet)  |                |              |           |                       |
|--|----------|---------------------------------------|--|----------------|--------------|-----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT     | UNLIQUIDATED | DISPUTED  | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>08M1-157255</b>   |          |                                       | Lawsuit  | T              |              | H         |                       |
| Cap One<br>PO Box 5155<br>Norcross, GA 30091-5155  |          |                                       |  |                |              |           | 5,439.00              |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                |              | П         | ·                     |
| Blitt And Gaines PC<br>661 Glenn Ave<br>Wheeling, IL 60090-6017  |          |                                       | Cap One  |                |              |           |                       |
| ACCOUNT NO. <b>517805264891</b>  |          |                                       | Revolving account opened 5/06  |                |              | $\forall$ |                       |
| Cap One<br>PO Box 5155<br>Norcross, GA 30091-5155  |          |                                       |  |                |              |           | 2,441.00              |
| ACCOUNT NO. <b>426684109943</b>  |          |                                       | Revolving account opened 6/06  | r              |              | П         | 2,111100              |
| Chase<br>800 Brooksedge Blvd<br>Westerville, OH 43081-2822   |          |                                       |  |                |              |           | 202.20                |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:  |                |              | Н         | 998.00                |
| Capital Management Services<br>726 Exchange St Ste 700<br>Buffalo, NY 14210-1484                         |          |                                       | Chase  |                |              |           |                       |
| ACCOUNT NO.  |          |                                       | Unknown account opened 8/02  | H              |              | Н         |                       |
| Emergency Treatment Sc Ets   |          |                                       | ·  |                |              |           |                       |
|  |          |                                       | Assistance and the second seco |                |              |           | 425.00                |
| ACCOUNT NO.  Medical Collections Sy 725 S Wells St Ste 700 Chicago, IL 60607-4578                        |          |                                       | Assignee or other notification for: Emergency Treatment Sc Ets   |                |              |           |                       |
| Sheet no1 of4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | <u> </u> |                                       | (Total of th   |                | age          | )         | \$ 9,303.00           |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate  | t als<br>tatis | tica         | n<br>al   | \$                    |

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IN RE Schnayer, Wayne A Jr

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Debtor(s)

\_ Case No. \_ (If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   |  | ((                                    | Continuation Sheet)  |                |              |          |                       |
|---|--|---------------------------------------|--|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)    | CODEBTOR   | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE   | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.   | <del>                                     </del> |                                       | Open account opened 5/08   | H              |              | H        |                       |
| Glen Ellyn Family Dental Care   |  |                                       |  |                |              |          |                       |
|   |  |                                       |  |                |              |          | 125.00                |
| ACCOUNT NO.   |  |                                       | Assignee or other notification for:  |                |              |          |                       |
| Trojan Professional Se<br>4410 Cerritos Ave<br>Los Alamitos, CA 90720-2549                                  |  |                                       | Glen Ellyn Family Dental Care  |                |              |          |                       |
| ACCOUNT NO.   |  |                                       | Open account opened 9/06   |                |              |          |                       |
| Loyola University Health Sys.   |  |                                       |  |                |              |          |                       |
| A CCCALINET NO.   |  |                                       | Assignee or other notification for:  |                |              |          | 350.00                |
| ACCOUNT NO.  Nationwide Credit And Co 9919 W Roosevelt Rd Ste 101 Westchester, IL 60154-2771                |  |                                       | Loyola University Health Sys.  |                |              |          |                       |
| ACCOUNT NO.   |  |                                       | Open account opened 7/06   |                |              | $\dashv$ |                       |
| Loyola University Health Sys.   |  |                                       |  |                |              |          |                       |
|   |  |                                       | And many and the same of the s |                |              |          | 61.00                 |
| ACCOUNT NO.  Nationwide Credit And Co 9919 W Roosevelt Rd Ste 101 Westchester, IL 60154-2771                |  |                                       | Assignee or other notification for:<br>Loyola University Health Sys.   |                |              |          |                       |
| ACCOUNT NO.   |  |                                       | Open account opened 7/06   |                |              |          |                       |
| Loyola University Health Sys.   |  |                                       |  |                |              |          |                       |
|   |  |                                       |  |                |              |          | 59.00                 |
| Sheet no. 2 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |  |                                       | (Total of t  | Sub<br>nis p   |              |          | \$ 595.00             |
|   |  |                                       | (Use only on last page of the completed Schedule F. Reporting the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate  | t als<br>tatis | tica         | n<br>al  | \$                    |

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IN RE Schnayer, Wayne A Jr

Debtor(s)

\_ Case No. \_ (If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |          | (1                                    | Continuation Sneet)   |                |              |             |                       |
|--|----------|---------------------------------------|---|----------------|--------------|-------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT     | UNLIQUIDATED | DISPUTED    | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                |              |             |                       |
| Nationwide Credit And Co<br>9919 W Roosevelt Rd Ste 101<br>Westchester, IL 60154-2771              |          |                                       | Loyola University Health Sys.   |                |              |             |                       |
| ACCOUNT NO.  |          |                                       |   |                |              | Н           |                       |
| Med1 02 Adventist La Grange Memorial   |          |                                       |   |                |              |             |                       |
| ACCOUNTING   |          |                                       | Assignee or other notification for:   |                |              |             | 75.00                 |
| ACCOUNT NO.  Merchants Cr 223 W Jackson Blvd Chicago, IL 60606-6908                                |          |                                       | Med1 02 Adventist La Grange Memorial  |                |              |             |                       |
| ACCOUNT NO.  |          |                                       | Open account opened 4/06  |                |              |             |                       |
| Provena Mercy Center   |          |                                       |   |                |              |             |                       |
|  |          |                                       |   |                |              |             | 75.00                 |
| ACCOUNT NO.  Creditors Collection B 755 Almar Pkwy Bourbonnais, IL 60914-2392                      |          |                                       | Assignee or other notification for: Provena Mercy Center  |                |              |             |                       |
| ACCOUNT NO.  |          |                                       | Open account opened 4/07  |                |              |             |                       |
| Will County  |          |                                       |   |                |              |             | 75.00                 |
| ACCOUNT NO.  |          |                                       | Assignee or other notification for:   |                |              | $  \cdot  $ |                       |
| Harris And Harris Ltd<br>600 W Jackson Blvd Fl 4<br>Chicago, IL 60661-5675                         |          |                                       | Will County   |                |              |             |                       |
| Sheet no 3 of 4 continuation sheets attached to  |          |                                       |   | L<br>Sub       |              |             |                       |
| Schedule of Creditors Holding Unsecured Nonpriority Claims   |          |                                       | (Total of the   |                | age<br>Tota  | t           | \$ 225.00             |
|  |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | o o<br>tica  | n<br>al     | \$                    |

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(If known)

IN RE Schnayer, Wayne A Jr

Debtor(s)

\_ Case No. \_

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|   |          | (                                     | continuation sheet)   |                  |              |          |                       |
|---|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)                  | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE  | CONTINGENT       | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| A CCOLINE NO  |          |                                       | Open account opened 4/07  | +                |              |          |                       |
| ACCOUNT NO. Will County   |          |                                       | Open account opened 4/07  |                  |              |          |                       |
|   |          |                                       |   |                  |              |          | 75.00                 |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                  |              |          |                       |
| Harris And Harris Ltd<br>600 W Jackson Blvd Fl 4<br>Chicago, IL 60661-5675  |          |                                       | Will County   |                  |              |          |                       |
| ACCOUNT NO.   |          |                                       | Open account opened 4/07  | +                |              |          |                       |
| Will County   |          |                                       |   |                  |              |          |                       |
| ACCOUNT NO.   |          |                                       | Assignee or other notification for:   |                  |              |          | 50.00                 |
| Harris And Harris Ltd<br>600 W Jackson Blvd Fl 4<br>Chicago, IL 60661-5675  |          |                                       | Will County   |                  |              |          |                       |
| ACCOUNT NO.   |          |                                       | Open account opened 4/07  |                  |              |          |                       |
| Will County   |          |                                       |   |                  |              |          |                       |
| ACCOUNTING  |          |                                       | Assignee or other notification for:   |                  |              |          | 50.00                 |
| ACCOUNT NO.  Harris And Harris Ltd  600 W Jackson Blvd Fl 4  Chicago, IL 60661-5675                                       |          |                                       | Will County   |                  |              |          |                       |
| ACCOUNT NO.   | _        |                                       |   |                  |              |          |                       |
|   |          |                                       |   |                  |              |          |                       |
| Sheet no. <u>4</u> of <u>4</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | <u> </u> |                                       | (Total of t   | Sub<br>his p     |              |          | \$ 175.00             |
|   |          |                                       | (Use only on last page of the completed Schedule F. Repo<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relat | rt als<br>Statis | stic         | n<br>al  | \$ <b>11,842.29</b>   |

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| IN RE Schnayer, Wayne A Jr      |       |                | Case No.                  |           |  |

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

(If known)

✓ Check this box if debtor has no executory contracts or unexpired leases.

Debtor(s)

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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IN RE Schnayer, Wayne A Jr

Case No.

Debtor(s)

(If known)

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#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |
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(If known)

IN RE Schnayer, Wayne A Jr

Debtor(s)

Case No.

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status                      |                                     | DEPENDENTS OF   | DEBTOR AND   | SPOU     | SE         |          |          |
|--|-------------------------------------|---|--------------|----------|------------|----------|----------|
| Single                                       |                                     | RELATIONSHIP(S):  |              |          |            | AGE(S):  |          |
| EMDLOVMENT.                                  |                                     | DERTOR  |              |          | CDOLLCE    |          |          |
| EMPLOYMENT:                                  |                                     | DEBTOR  |              |          | SPOUSE     |          |          |
| Name of Employer                             | Pressman<br>Alphagraphic<br>3 years | es  |              |          |            |          |          |
|  | _                                   | r projected monthly income at time case filed) lary, and commissions (prorate if not paid month | .l.,)        | \$       | DEBTOR     | ¢        | SPOUSE   |
| 2. Estimated monthly                         |                                     | nary, and commissions (prorate if not paid mont   | шу)          | \$<br>   | 3,499.99   | \$       |          |
| 3. SUBTOTAL                                  |                                     |   |              | \$       | 3,499.99   | \$       |          |
| 4. LESS PAYROLL a. Payroll taxes and         |                                     |   |              | \$       | 744.12     | \$       |          |
| b. Insurance                                 |                                     |   |              | \$       |            | \$       |          |
| c. Union dues                                | Child Suppo                         | n ré  |              | \$ —     | 392.17     | \$       |          |
| d. Other (specify)                           | Child Suppo                         | ort   |              | \$<br>   | 392.17     | \$ ——    |          |
| 5. SUBTOTAL OF I                             | PAYROLL I                           | DEDUCTIONS  |              | \$       | 1,136.29   | \$       |          |
| 6. TOTAL NET MC                              | NTHLY TA                            | KE HOME PAY   |              | \$       | 2,363.70   |          |          |
|  |                                     | of business or profession or farm (attach detailed  | statement)   | \$       |            | \$       |          |
| 8. Income from real p 9. Interest and divide |                                     |   |              | \$       |            | \$       |          |
|  | ance or suppo                       | ort payments payable to the debtor for the debtor   | 's use or    | Φ        |            | φ        |          |
| 11. Social Security or                       |                                     | ment assistance   |              | φ        |            | Φ        |          |
| (Specify)                                    |                                     |   |              | \$       |            | \$       |          |
| 12. Pension or retiren                       | nent income                         |   |              | \$<br>\$ |            | \$       |          |
| 13. Other monthly inc                        | come                                |   |              |          |            | Ψ        |          |
| (Specify)                                    |                                     |   |              | \$       |            | \$       |          |
|  |                                     |   |              | \$       |            | \$<br>\$ |          |
| 14. SUBTOTAL OF                              | I INFS 7 TE                         | IROUCH 13   |              | \$       |            | \$       |          |
|  |                                     | <b>COME</b> (Add amounts shown on lines 6 and 14)   |              | \$<br>\$ | 2,363.70   |          |          |
|  |                                     |   |              |          | _,,,,,,,,, | T        |          |
|  |                                     | <b>ONTHLY INCOME</b> : (Combine column totals find the properties on line 15)                   | rom line 15; |          | \$         | 2,363.7  | <u> </u> |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None** 

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(If known)

2,360.00

IN RE Schnayer, Wayne A Jr

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Debtor(s)

Case No. \_

#### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| SCHEDULE 3 - CORRENT EXITENDITURES OF INDIVIDUAL DEBIG   | <b>L</b> (B)  |             |
|--|---------------|-------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Proraquarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the don Form22A or 22C. |               |             |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."  | te a separate | schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$            | 800.00      |
| a. Are real estate taxes included? Yes No  |               |             |
| b. Is property insurance included? Yes No  |               |             |
| 2. Utilities:  |               |             |
| a. Electricity and heating fuel  | \$            | 175.00      |
| b. Water and sewer   | \$            |             |
| c. Telephone   | \$            | 100.00      |
| d. Other Internet And Cable  | \$            | 100.00      |
|  | \$            |             |
| 3. Home maintenance (repairs and upkeep)   | \$            |             |
| 4. Food  | \$            | 400.00      |
| 5. Clothing  | \$            | 100.00      |
| 6. Laundry and dry cleaning  | \$            | 45.00       |
| 7. Medical and dental expenses   | \$            | 100.00      |
| 3. Transportation (not including car payments)   | \$            | 200.00      |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$            |             |
| 10. Charitable contributions   | \$            |             |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  | 4             |             |
| a. Homeowner's or renter's   | \$            |             |
| b. Life  | \$            |             |
| c. Health  | \$            |             |
| d. Auto  | \$            | 60.00       |
| e. Other   | \$            |             |
| 10 m / 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   | \$            |             |
| 2. Taxes (not deducted from wages or included in home mortgage payments)   | Φ.            |             |
| (Specify)  | \$            |             |
|  | \$            |             |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)  | Φ.            | 450.00      |
| a. Auto  | \$            | 150.00      |
| b. Other   | \$            |             |
|  | \$            |             |
| 4. Alimony, maintenance, and support paid to others  | \$            |             |
| 15. Payments for support of additional dependents not living at your home  | \$            |             |
| 6. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$            | 400.00      |
| 17. Other Personal Care & Grooming   | \$            | 100.00      |
| Auto Repair And Maintenance  | \$            | 30.00       |
|  | \$            |             |

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: **None** 

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if

applicable, on the Statistical Summary of Certain Liabilities and Related Data.

#### 20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$ 2,363.70 |
|--|-------------|
| b. Average monthly expenses from Line 18 above       | \$ 2,360.00 |
| c. Monthly net income (a. minus b.)                  | \$ 3.70     |

(If known)

IN RE Schnayer, Wayne A Jr

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Debtor(s)

Case No.

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 19 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: September 26, 2008 Signature: /s/ Wayne A Schnayer, Jr Debtor Wayne A Schnayer, Jr Signature: \_ (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Signature:

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Document Page 27 of 42 United States Bankruptcy Court

Northern District of Illinois

| IN RE:               | Case No.  |
|----------------------|-----------|
| Schnayer, Wayne A Jr | Chapter 7 |
| Debtor(s)            |           |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. I1 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3,499.00 2008 income from employment (monthly)

39,543.00 2007 income from employment

38,000.00 2006 income from employment

#### 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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|-------------|---|
| None        | b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within <b>90 days</b> immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |
| None        | c. All debtors: List all payments made within <b>one year</b> immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |
| 4. Sui      | its and administrative proceedings, executions, garnishments and attachments  |
| None        | a. List all suits and administrative proceedings to which the debtor is or was a party within <b>one year</b> immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |
| AND<br>Capi | TION OF SUIT  CASE NUMBER  NATURE OF PROCEEDING AND LOCATION DISPOSITION AND LOCATION DISPOSITION Cook Pending 1-157255   |
| None        | b. Describe all property that has been attached, garnished or seized under any legal or equitable process within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |
| 5. Re       | possessions, foreclosures and returns   |
| None        | List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |
| 6. As       | signments and receiverships   |
| None        | a. Describe any assignment of property for the benefit of creditors made within <b>120 days</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed unless the spouses are separated and joint petition is not filed.)   |
| None        | b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |
| 7. Gif      | fts   |
| None        | List all gifts or charitable contributions made within <b>one year</b> immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |
| 8. Lo       | sses  |
| None        | List all losses from fire, theft, other casualty or gambling within <b>one year</b> immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |
| 9. Pa       | yments related to debt counseling or bankruptcy   |
| None        | List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within <b>one year</b> immediately preceding the commencement of this case.  |

NAME AND ADDRESS OF PAYEE Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602

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DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

List all property owned by another person that the debtor holds or controls.

 $\checkmark$ 

#### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpaver identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.  $\checkmark$ 

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: September 26, 2008 | Signature /s/ Wayne A Schnayer, Jr |                      |
|--------------------------|------------------------------------|----------------------|
|                          | of Debtor                          | Wayne A Schnayer, Jr |
| Date:                    | Signature of Joint Debtor (if any) |                      |
|                          | o continuation pages attached      |                      |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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| IN RE:   |  |  |  | Case No.  |                                     |  |   |
|--|--|--|--|---|-------------------------------------|--|---|
| Schnayer, Wayr   | ne A Jr  |  |  | Chapter 7   |                                     |  |   |
|  | De   | btor(s)  |  | _ 1 _   |                                     |  |   |
|  | CHAPTER 7 INI  | DIVIDUAL D   | EBTOR'S STATEMENT  | OF INTEN  | TION                                |  |   |
| I have filed a so  | chedule of executory contracts   | and unexpired lea  | lebts secured by property of the esases which includes personal propestate which secures those debts of                            | erty subject to                                       |                                     | ed lease.  |   |
| Description of Secured Pro   | perty  | Creditor's Name  |  | Property will be Surrendered                          | Property is<br>claimed as<br>exempt | Property will<br>be redeemed<br>pursuant to 11<br>U.S.C. § 722 | Debt will be<br>reaffirmed<br>pursuant to 11<br>U.S.C. § 524(c) |
| 02 Dodge Carav   | <i>r</i> an  | Us Bank  |  |   |                                     |  | ✓   |
|  |  |  |  |   |                                     |  | Lease will be<br>assumed<br>pursuant to 11<br>U.S.C. §          |
| Description of Leased Prop   | erty   |  | Lessor's Name  |   |                                     |  | 362(h)(1)(A)  |
| 09/26/2008   | /s/ Wayne A Schnayer, 、  | Ir   |  |   |                                     |  |   |
| Date   | Wayne A Schnayer, Jr   |  | Debtor   |   | Joi                                 | nt Debtor (i   | f applicable)   |
| I declare under per<br>compensation and<br>and 342 (b); and,<br>bankruptcy petitio | enalty of perjury that: (1) I an<br>have provided the debtor with<br>(3) if rules or guidelines have b | n a bankruptcy p<br>a copy of this doc<br>been promulgated<br>btor notice of the | perition preparer as defined in 11 cument and the notices and inform pursuant to 11 U.S.C. § 110(h) maximum amount before preparir | U.S.C. § 110;<br>nation required u<br>setting a maxin | (2) I prepunder 11 Unum fee fo      | pared this d<br>J.S.C. §§ 110<br>or services cl                | ocument for 0(b), 110(h), nargeable by                          |
| Printed or Typed Nar   | me and Title, if any, of Bankruptcy  | Petition Preparer  |  | Social Security                                       | No. (Requi                          | red by 11 U.S  | S.C. § 110.)  |
|  | petition preparer is not an inc<br>n, or partner who signs the doc                                     |  | e name, title (if any), address, an  | d social securit                                      | y number                            | of the office  | r, principal,   |
| Address  |  |  |  |   |                                     |  |   |
| Signature of Bankrup   | otcy Petition Preparer   |  |  | Date  |                                     |  |   |
| Names and Social is not an individua   |  | dividuals who pre  | epared or assisted in preparing this   | document, unle  | ess the ban                         | kruptcy peti   | tion preparer   |

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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| IN RE:                        |   | Case No  |
|-------------------------------|---|--|
| Schnayer, Wayne A Jr          |   | Chapter 7  |
|                               | Debtor(s)                               | · -  |
|                               | VERIFICATION OF CRE                     | DITOR MATRIX   |
|                               |   | Number of Creditors14                                  |
| The above-named Debtor(s) her | eby verifies that the list of creditors | is true and correct to the best of my (our) knowledge. |
| Date: September 26, 2008      | /s/ Wayne A Schnayer, Jr Debtor         |  |
|                               | Deoloi                                  |  |
|                               | Joint Debtor                            |  |

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Schnayer, Wayne A Jr 8956 W 92nd St Hickory Hills, IL 60457-1640 Document Page 33 of 42 Harris And Harris Ltd 600 W Jackson Blvd FI 4 Chicago, IL 60661-5675

Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602

**Medical Collections Sy** 725 S Wells St Ste 700 Chicago, IL 60607-4578

**Asset Acceptance** PO Box 2036 Warren, MI 48090-2036 **Merchants Cr** 223 W Jackson Blvd Chicago, IL 60606-6908

**Baron Coll** 155 Revere Dr Northbrook, IL 60062-1558 Nationwide Credit And Co 9919 W Roosevelt Rd Ste 101 Westchester, IL 60154-2771

**Bevann Hamill** 706 W Main St Plainfield, IL 60544-1565 **Trojan Professional Se** 4410 Cerritos Ave Los Alamitos, CA 90720-2549

**Blitt And Gaines PC** 661 Glenn Ave Wheeling, IL 60090-6017 **Us Bank** PO Box 5229 Cincinnati, OH 45201-5229

Cap One PO Box 5155

Norcross, GA 30091-5155

**Capital Management Services** 726 Exchange St Ste 700 Buffalo, NY 14210-1484

Chase 800 Brooksedge Blvd Westerville, OH 43081-2822

**Creditors Collection B** 755 Almar Pkwy Bourbonnais, IL 60914-2392

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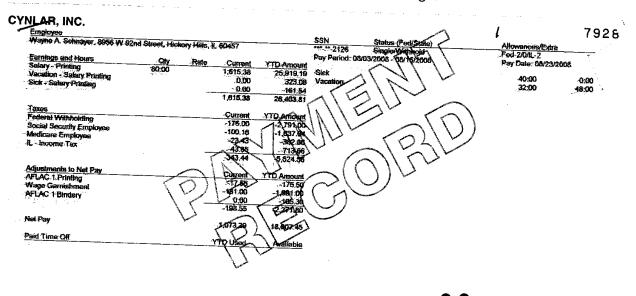
| IN | RE:   | Case No   |                      |
|----|---|---|----------------------|
| Sc | chnayer, Wayne A Jr   | Chapter 7   |                      |
|    |   | ebtor(s)  |                      |
|    | DISCLOSURE (  | OF COMPENSATION OF ATTORNEY FOR DEBTOR  |                      |
| 1. |   | ule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation ptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(follows:  |                      |
|    | For legal services, I have agreed to accept   | \$ <u></u>  | 676.00               |
|    | Prior to the filing of this statement I have received   | \$ <u></u>  | 676.00               |
|    | Balance Due   | s   | 0.00                 |
| 2. | The source of the compensation paid to me was:  | Debtor Other (specify):   |                      |
| 3. | The source of compensation to be paid to me is:   | Debtor Other (specify):   |                      |
| 4. | ✓ I have not agreed to share the above-disclosed  | d compensation with any other person unless they are members and associates of my law firm.   |                      |
|    | I have agreed to share the above-disclosed cortogether with a list of the names of the people                                   | mpensation with a person or persons who are not members or associates of my law firm. A cope sharing in the compensation, is attached.  | by of the agreement, |
| 5. | In return for the above-disclosed fee, I have agreed  | to render legal service for all aspects of the bankruptcy case, including:  |                      |
|    | <ul><li>b. Preparation and filing of any petition, schedule</li><li>c. Representation of the debtor at the meeting of</li></ul> | d rendering advice to the debtor in determining whether to file a petition in bankruptcy; les, statement of affairs and plan which may be required; f creditors and confirmation hearing, and any adjourned hearings thereof; eccedings and other contested bankruptcy matters; |                      |
| 6. | By agreement with the debtor(s), the above disclose   | sed fee does not include the following services:  |                      |
|    |   |   |                      |
|    | certify that the foregoing is a complete statement of proceeding.   | CERTIFICATION  any agreement or arrangement for payment to me for representation of the debtor(s) in this bank  | ruptcy               |
| -  | September 26, 2008  | /s/ Troy L Gleason  |                      |
|    | Date  | Signature of Attorney   |                      |

Gleason & Gleason

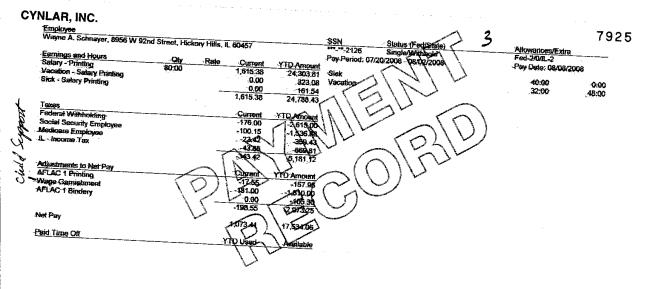
Name of Law Firm

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| Form 1040E   | :7                   | Income Tax   | Return for                                     | Sina      | le and              | _           |                     |             |                             |  |  |
|--|----------------------|--|--|-----------|---------------------|-------------|---------------------|-------------|-----------------------------|--|--|
| 1040   |                      | Joint Filers Your first name   | With No De                                     | pend      | dents               |             | 2007                |             |                             |  | OMB No. 1545-0074                          |
| Label<br>(See instructions)  |                      | 1  |  | Mi        | Last name           |             |                     |             |                             | Your soc                                     | ial security number                        |
| (OOB HIST UCTIONS)   | A<br>B               | Wayne If a joint return, spouse's first                                | name   | _A_       | Schnaye:            | r, J        | ·                   |             |                             | 72 ZI  |  |
| Use the IRS label.   | E                    |  |  |           | Lastrianie          |             |                     |             | 1                           | Spouse's s                                   | ocial security number                      |
| Otherwise,   |                      | Home address (number and   | street). If you have a P.O.                    | box, see  | instructions.       |             | Apt                 | DO.         | <u> </u>                    |  |  |
| please print<br>or type.   | HER                  | 8956 W. 92nd   |  |           |                     |             | , φ.                |             | <b>A</b>                    |  | ust enter your                             |
|  | E                    | City, town or post office. If yo                                       | u have a foreign address,                      | see instr | ructions.           | State       | ZIP code            |             | <del> </del>                |  | V(s) above.                                |
| Presidential<br>Election<br>Campaign                                       | L                    | Hickory Hills  |  |           |                     | IL          |                     |             | 1 ,                         | iecking a<br>shange y                        | i box below will not<br>our tax or refund. |
| (see instrs)   |                      | Check here if you, or y  | our spouse if a join                           | t return  | n, want \$3 to      | go to th    | is fund?            | <u>.</u>    | ▶ [                         | You  | Spouse                                     |
| Income   |                      | Attach your Form(s)  | vv-2 · · · · · · · ·                           |           | · · · · · ·         | your F      | orm(s) W-2.         |             |                             | . 1  | 39,543.                                    |
| Attach<br>Form(s)  |                      | Taxable interest. If the Form 1040EZ                                   | e total is over \$1.50                         | n vou     | connet use          |             |                     |             |                             | . 2  |  |
| W-2 here.<br>Enclose,  |                      | Unemployment comp<br>dividends (see instruc                            | ensation and Alack                             | o Dom     |                     |             |                     |             |                             |  | ***************************************    |
| but do not<br>attach, any  | 4                    | Add lines 1, 2, and 3.   |  |           |                     |             |                     |             |                             |  |  |
| payment.   | 5                    | If someone can claim applicable box(es) be                             | I VOIT FOR VOLIT SOOLS                         | a if a i  | oint roturn) o      |             |                     | the         | ····                        | . 4  | 39,543.                                    |
|  |                      | If no one can claim yo   | NI (OF YOUR COOLIGE !                          | f a ioin  | it return) ente     | r \$8 75    | in if elector \$    | 17 EAN :£   |                             |  |  |
|  |                      | manag jonney   | . See instructions .                           | • • •     | · · · · · · ·       |             |                     |             |                             | . 5  | 8,750.                                     |
| Day-man-sat-   | - 6                  | Subtract line 5 from li taxable income                                 | ne 4. If line 5 is lam                         | or than   | tina 4 antan        | A TL        |                     |             |                             |  | 30,793.                                    |
| Payments<br>and tax  | . 7                  | Federal income tax w   | ithheld from box 2 c                           | of vour   | Form(s) W-2         |             |                     |             |                             |  |  |
|  | 8                    | a Earned Income cred   | it (EIC)                                       |           | 1 0111(8) 44-2      |             | · · · · · · ·       | • • • •     | ····                        | . 7  | 4,142.                                     |
|  | - 1                  | b Nontaxable combat p  | ay election                                    |           |                     | <del></del> | 8 b                 | · · · ·     | · · · · ·                   | . 8a   |  |
|  |                      |  |  |           |                     |             |                     |             |                             | _  |  |
|  | 10                   | Add lines 7 and 8a. Ti Tax. Use the amount booklet. Then, enter the    |  |           |                     |             |                     |             |                             |  | 4,142.                                     |
| Refund   | 11 a                 | in line and rarger man   | ine 10, subtract line                          | 10 fro    | m line 9. This      | s is you    | r refund.           | · · · · ·   | • • • •                     | . 10   | 4,225.                                     |
| lave it directly<br>deposited! See<br>instructions and<br>ill in 11b, 11c. |                      | If Form 8888 is attach   | ed, check here -                               | 4         |                     |             | · · · · · · · ·     | <u>,.</u>   |                             | 11a  |  |
| and 11d or Form  | - (                  | Routing number   | XXXXXXXX                                       |           | c Type:             | ∐_ Ch       | ecking              | Savings     |                             |  |  |
|  | <u> </u>             | Account number   | XXXXXXXXXX                                     | XXXX      | XX                  |             |                     |             |                             |  |  |
| Amount<br>ou owe   | 12                   | If line 10 is larger than<br>For details on how to p                   | line 9, subtract line<br>pay, see instructions | 9 from    | n line 10. This     | is the      | amount you          | owe.        |                             | 42   |  |
| Third party  | Do yo                | u want to allow another pers   | on to discuss this return                      | with the  | RS (see instru      | ctions)?    |                     | · · · ·     |                             | Complete                                     | e the following. X No                      |
| esignee  |                      | nee's  |  |           |                     |             |                     |             |                             |  | ane monowing. AT NO                        |
| Sign   |                      |  | nat I have examined this n                     | etum, an  | Phone no.           | v knowler   | ne and ballet it is | t           | Personal<br>no. (PIN)       | ID <b>▶</b>                                  |  |
| ere  | Source               | penalties of perjury, I declare to<br>so fincome I received during the | ne tax year. Declaration of                    | prepare   | r (other than the t | expayer)    | s based on all info | mation of v | n, and accu<br>which the pr | rately lists a<br>eparer has                 | all amounts and<br>any knowledge.          |
|  | Yours                | ignature   |  |           | Date                | Your occ    |                     |             |                             |  | ne phone no.                               |
| pint return?<br>se instruc-  | Conve                | -111   |  |           |                     | mana        | ger                 |             |                             |  | •  |
| ons. Keep<br>copy for<br>our records.                                      | opous                | e's signature. If a joint return, b                                    | oth must sign.                                 |           | Date                | Spouse's    | occupation          |             |                             |  |  |
| aid  | Prepare<br>signatu   | er's re  |  |           |                     | D           | ate                 | Check if    |                             | Pr   | eparer's SSN or PTIN                       |
| reparer's  |                      |  | lf-Prepared                                    |           | <del></del> -       |             |                     | self-empl   | oyed                        |  |  |
|  | ram's r<br>if self-e | name (or yours mployed), Se, and ZIP code                              | repared  |           |                     |             |                     |             | Г                           |  |  |
|  | auures:              | s, and ZIP code  |  |           | <del></del>         |             |                     |             | EIN                         |  |  |
|  |                      |  | · · · · · · · · · · · · · · · · · · ·          |           |                     |             |                     |             | Phone no.                   | <u>.                                    </u> |  |



| AR, INC.   |   |                                 |                                |  | <del>-</del>                                  | 7904  |
|--|---|---------------------------------|--------------------------------|--|---|-------|
| ayne A. Schnayer, 8956 W 9   | 2nd Street, Hick                        | ory Hills, IL 60457             |                                | SSN Status (Fed/State) *********************** Single/Milibolah  | Aliowances/Extre                              |       |
| amings and Hours<br>alary - Printing<br>ck - Salary Printing           | Qty<br>64:00<br>8:00                    | Rate Curre                      | 0 22,688.4                     | Pay Period: 07/06/2008 -507/19/2008  | Fed-2/0/IL-2<br>Pay Date: 07/25/2008<br>40:00 | 0:00  |
| cation - Salary Printing   | 8:90                                    | 161.<br>161.<br>1,515.          | 4 323.0                        |  | 32:00   | 48:00 |
| ixes<br>deral Withholding<br>cial Security Employee<br>dicare Employee | · — — . · · · · · · · · · · · · · · · · | -176.6<br>-100.1                | 0 1-2,439,0                    |  | )   |       |
| - Income Tax   |   | -234<br>-431<br>-343.4          | 336.01<br>5 -625.96            | Nº (PAL)   | ,   |       |
| justments to Net Pay   |   | Chore                           | YTD Amount                     | $\sim 1000$  |   |       |
| LAC 1 Printing<br>ige Garnishment<br>LAC 1 Bindery                     |   | 17.6<br>-181.0<br>0.0<br>-198.5 | -140.46<br>1.689.00<br>-105.30 |  |   |       |
| Pay  | \                                       | 1:073.4                         |                                | The same of the sa |   |       |
| d Time Off   |   | Y) D Use                        | F Land                         |  |   |       |



| _AR, INC.<br>mptoyee<br>Vayne A. Schnayer, 8956 W 92  | nd Street, Hick | ory Hills, II. | 60457  |   | SSN<br>2126<br>Pay Period: 0 | Status (Fed/State) Single/Withhold 9/03/2008 - 08/15/2008 | Allowances/Extra<br>Fed-2/0/IL-2<br>Pay Date: 08/23/2008 |                        |
|---|-----------------|----------------|--|---|------------------------------|---|--|------------------------|
| arnings and Hours<br>alary - Printing<br>facation - Salary Printing<br>fack - Salary Printing   | Qly<br>80:00    | Rate           | Current<br>1;615:38<br>0,00<br>-0:00<br>1,615:38             | 25,919-19<br>323,08<br>161:54<br>26,403.81                              | Sick<br>Vacation             |   | 40:90<br>32 <del>:90</del>                               | -0:00<br>48: <b>00</b> |
| exos<br>ederal Withholding<br>Social Security Employee<br>Acalicare Employee<br>L, - Income Tax |                 |                | Current<br>-176.00<br>-100.16<br>-23.43<br>-43.85<br>-343.44 | 7TD Amount<br>-2,791.00<br>-1,637.04<br>-382.86<br>-713.66<br>-5,524.56 |                              |   |  |                        |
| Adjustments to Net Pay<br>AFLAC 1 Printing<br>Wage Garnistanent<br>AFLAC 1 Bindery              |                 |                | Current<br>-17,55<br>-181,00<br>0:00<br>-198,55              | Y1D Amount<br>-175.50<br>-1,991.00<br>-105.30<br>-2,271.80              |                              |   |  |                        |
| Net Pay<br>Paid Time Off  |                 |                | 1,073,39<br>YTO Used   | 18,507.45<br>Available  |                              |   |  |                        |

Department #7505 P.O. Box 1259ase 08-25580 OAKS, PA 19456

Office Hours: Central Standard Time:

M-TH 8AM-9PM;FR 8AM-5PM;SA 8AM-12PM

Telephone: (888) 249-3811/ (888) 249-3811

Doc 1

9896 - 588

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Desc Main

223 W. JACKSON BLVD CHICAGO, ILLINOIS 60606 www.merchantscreditguide.com

MEMBER OF THE AMERICAN COLLECTORS ASSOCIATION

Our File#: Our Client:

08-080580504

ADVENTIST LA GRANGE MEMORIAI

Patient Name:

HOSPITAL ZACHERY SCHNAYER

WAYNE SCHNAYER TZ GNSP W JZPB

03/03/08

HICKORY HILLS IL 60457-1640

Account/Service# 9104030

Amount

662.48

TOTAL \*\*\*\*\*\*\* \$ 662.48

Please be advised we represent the above-mentioned client. We are a licensed and bonded collection agency. We have been assigned the task of collecting the balance due. Your rights under Public Law 95-109 Title VIII are stated at the bottom of this letter. This communication is from a debt collector and is an attempt to collect a debt. Any information obtained will be used for that purpose.

Our client's records indicate they have applied any insurance proceeds expected and this balance is your responsibility. We hope you will resolve this account. If you respond to this letter within 30 days of receipt of it and work with us to

\* will be happy to work with you in a courteous, professional manner.

\* may be able to stop this account from being reported to the credit bureau.

\* can help you if you think your insurance company has not paid properly.

\* may stop our collection efforts.

Please call us or mail your payment and/or correspondence using the enclosed envelope. To install inquiries and payments to our office. Be sure to reference our file number. are proper credit to your account direct

Sincerely NMED ADAM KELLY NMED ADAM KELLY

Unless you notify this office within 30 days after receiving this notice that you dispute the validity of the debt or any portion thereof, this office will assume this debt to be valid. If you notify this office in writing within 30 days from receiving this notice that you dispute the validity of this debt or any portion thereof, this office will obtain a verification of the debt or obtain a copy of a judgment and mail you a you with the name and address of the original creditor, if different from the current creditor.

\_\_\_\_\_08CD01U1-OFF

Name: WAYNE SCHNAYER Our File #: 08-080580504

Opt-out Notice Description: Checks received in our office may be electronically processed. This is a more secure process for our customers in that the check information cannot be seen by anyone after the payment is electronically converted. You may elect to not have your check processed electronically by checking the box provided.

You can now pay by automated phone system or over the Internet! Pay by phone at 866-294-0331 or on the web at www.paymybill.com. Enter 1791441 as your User ID-Access Code. Enter 08-080580504 as your password. Visit us online at www.merchantscreditguide.com

MERCHANTS' CREDIT GUIDE CO. 223 W. JACKSON BLVD CHICAGO, ILLINOIS 60606 Madhadhadhadhadhalladhadhadhadh

Desc Main

Re:

**FNANB** 

Client Account #: 4411331107 Asset Acceptance LLC Acct: 23734476

Current Balance: \$644.29 Settlement Balance: \$193.29 Expiration Date: August 30, 2008

70% DISCOUNT!! SEE BELOW FOR DETAILS

**HOT AUGUST OFFER** 

Dear WAYNE SCHNAYER JR:

Are you feeling the heat with economic conditions being what they are? We understand and we want to work with you in alleviating this debt. So this month we are offering to you a cool 70% discount on your balance of \$644.29. Please contact your account representative listed below to discuss your payment options. See the example below:

|                   | See to discuss your payment options. See |
|-------------------|--|
| Current Balance:  | \$644.29                                 |
| Discount Offer:   | \$451.00                                 |
| Payment Due Date: | On or before August 30, 2008             |
| PAY THIS AMOUNT:  | \$193.29                                 |
|                   |  |

Call CHERI MORGAN toll-free at 877-850-0074 at ext. 0 today. This offer will expire on August 30, 2008.

Act now - go to www.paymybill.com and pay online, using your debit card, credit card or checking account. Your user ID is: 0271627. Your password is: 23734476.

In addition to your savings of \$451.00, you can also receive the following benefits:

- 1. A zero balance on your FNANB account with us
- 2. A paid account letter

It may be possible to extend the deadline under certain circumstances. The settlement offer outlined above is guaranteed through the above referenced date. After that time we reserve the right to modify the settlement offer, or revoke the offer entirely. We are not obligated to renew this offer.

This offer is void if a previous settlement has been arranged.

This is an attempt to collect a debt and any information obtained will be used for that purpose.

CHERI MORGAN - Phone: 877-850-0074 Ext. 0

Debt Collector Asset Acceptance LLC

\*\*Detach Lower Portion and Return with Payment\*\*\*

PCSASSE036244OHODS

PO Box 2039 Warren MI 48090-2039

ADDRESS SERVICE REQUESTED

Asset Acceptance LLC Acct: 23734476 Current Balance: \$644,29 Settlement Balance: \$193.29 Expiration Date: August 30, 2008

August 4, 2008

**#BWNHPYM** #0000000237344767# 0743312 045820930 OH2-6244 ldfallaalahfddadadbffadallbaalddfadfad WAYNE SCHNAYER JR 8956 W 92nd St Oak Lawn IL 60457-1640

ASSET ACCEPTANCE LLC PO Box 2036 Warren MI 48090-2036

bladhaldadhaaldlaadhadladladladla

Certificate Number: 02910-ILN-CC-004742490

# **CERTIFICATE OF COUNSELING**

| I CERTIFY that on August 22, 2008           | , e         | at <u>6:39</u> | o'clock PM EDT                      |
|---|-------------|----------------|-------------------------------------|
| Wayne Schnayer Jr                           |             | rece           | ived from                           |
| InCharge Education Foundation, Inc.         |             |                | ,                                   |
| an agency approved pursuant to 11 U.S.C     | C. § 111 to |                |                                     |
| Northern District of Illinois               | , a         | n individua    | l [or group] briefing that complied |
| with the provisions of 11 U.S.C. §§ 109(h   |             |                |                                     |
| A debt repayment plan was not prepared      | If a c      | debt repaym    | ent plan was prepared, a copy of    |
| the debt repayment plan is attached to this |             |                |                                     |
| This counseling session was conducted by    | y internet  |                |                                     |
|   |             |                |                                     |
| Date: August 22, 2008                       | Ву          | /s/Roberto     | Travieso                            |
|   | Name        | Roberto Tr     | avieso                              |
|   | Title       | Education (    | Counselor                           |
|   |             |                |                                     |
|   |             |                |                                     |

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Case 08-25580

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| IN RE:   | Case No.   |  |  |  |
|--|--|--|--|--|
| Schnayer, Wayne A Jr   | Chapter 7  |  |  |  |
| Debtor(s)  |  |  |  |  |
| DECLARATION REGARDING Signed by Debtor(s) or Cor To Be Used When Filing  | porate Representative  |  |  |  |
| PART I - DECLARATION OF PETITIONER   | B : 4  |  |  |  |
| A. To be completed in all cases.   | Date: August 23, 2008  |  |  |  |
| I (We) Wayne A Schnayer, Jr  officer, partner, or member, hereby declare under penalty of perjury th correct social security number(s) and the information provided in the elea application to pay filing fee in installments, is true and correct. I(we) schedules, and this DECLARATION to the United States Bankruptcy (with the Clerk in addition to the petition. I(we) understand that failure to pursuant to 11 U.S.C. sections 707(a) and 105. | ctronically filed petition, statements, schedules, and if applicable of consent to my(our) attorney sending the petition, statement. |  |  |  |
| B. To be checked and applicable only if the petitioner is an individebts and who has (or have) chosen to file under chapter 7.   | ridual (or individuals) whose debts are primarily consume  |  |  |  |
| √ I(we) am(are) aware that I(we) may proceed under chapter 7, 11 relief available under each such chapter; I(we) choose to proce chapter 7.  | 1, 12, or 13 of Title 11 United States Code; I(we) understand the ed under chapter 7; and I(we) request relief in accordance with    |  |  |  |
| C. To be checked and applicable only if the petition is a corporation  | on, partnership, or limited liability entity.  |  |  |  |
| I declare under penalty of perjury that the information provided it to file this petition on behalf of the debtor. The debtor requests to  | in this matician is to a   |  |  |  |

Signature:

@ 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Farms Software Only

Signature:

(Joint Debtor)